

05-25-2001

Form PTO-1594

(Rev. 03/01)

OMB No. 0651-0027 (exp. 5/31/2002)

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U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Trademark Office

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Omni Corporation

- ☐ Individual(s) ☐ Association
- ☐ General Partnership ☐ Limited Partnership
- ☒ Corporation-State Illinois
- ☐ Other _____

Additional name(s) of conveying party(ies) attached? ☐ Yes ☐ No

3. Nature of conveyance:

- ☐ Assignment ☒ Merger
- ☐ Security Agreement ☐ Change of Name
- ☐ Other _____

Execution Date: 06/30/99

2. Name and address of receiving party(ies)

Name: Sta-Rite Industries, Inc.Internal Address: Law DepartmentStreet Address: 293 Wright StreetCity: Delavan State: WI Zip: 53115

- ☐ Individual(s) citizenship _____
- ☐ Association _____
- ☐ General Partnership _____
- ☐ Limited Partnership _____
- ☒ Corporation-State Wisconsin
- ☐ Other _____

If assignee is not domiciled in the United States, a domestic representative designation is attached: ☐ Yes ☐ No
(Designations must be a separate document from assignment)

Additional name(s) & address(es) attached? ☐ Yes ☐ No

4. Application number(s) or registration number(s):

A. Trademark Application No.(s)

B. Trademark Registration No.(s)
1608999Additional number(s) attached ☐ Yes ☒ No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Sta-Rite Industries, Inc.Internal Address: Law DepartmentStreet Address: 293 Wright StreetCity: Delavan State: WI Zip: 531156. Total number of applications and registrations involved: 17. Total fee (37 CFR 3.41).....\$ 40.00

- ☒ Enclosed
- ☐ Authorized to be charged to deposit account

8. Deposit account number:

(Attach duplicate copy of this page if paying by deposit account)

DO NOT USE THIS SPACE

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

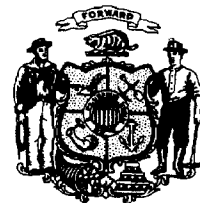
James C. Green, Esq.

Name of Person Signing

[Signature]
SignatureMay 9, 2001
DateTotal number of pages including cover sheet, attachments, and document: 1

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patent & Trademarks, Box Assignments
Washington, D.C. 20231

TRADEMARK
REEL: 002302 FRAME: 0533



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that the annexed copy has been compared with the document on file in the Corporation Section of the Division of Corporate & Consumer Services of this department, and that the same is a true copy thereof; and that I am the legal custodian of said document, and that this certification is in due form.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed the official seal
of the Department.

A handwritten signature in black ink, appearing to read "Ray Allen".

RAY ALLEN, Administrator
Division of Corporate & Consumer Services
Department of Financial Institutions

DATE: JAN - 3 2001

BY: A handwritten signature in black ink, appearing to read "Patricia Webb".

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

01 1W17262

Sec. 180.1101,
180.1105 & 180.1107,
Wis. Stats.

State of Wisconsin
Department of Financial Institutions

ARTICLES OF MERGER
(Domestic, for-profit Corporation with Foreign, for-profit corporation)

A. Name and state of incorporation of the merging (**non-surviving**) corporation(s):

Name: Omni Corporation <i>NC</i>	State of Incorporation: Illinois
Name:	State of Incorporation: #.# 157637 PCORP 50 50.00

B. Name (prior to any amendment in the Plan of Merger to change the name) and state of incorporation of the **surviving** corporation:

Name: Sta-Rite Industries, Inc.	State of Incorporation: Wisconsin
------------------------------------	--------------------------------------

C. The adopted Plan of Merger (the "Plan") is attached as Exhibit A.

D. The Plan was approved by each foreign corporation that is a party to the merger in accordance with the laws of the state under which it was incorporated, and by each domestic corporation that is a party to the merger in accordance with (*select and* (X) *mark one of the following*):

(X) Sec. 180.1103, Wis. Stats. OR () Sec. 180.1104, Wis. Stats.

E. (OPTIONAL) These articles of merger, when filed, shall be effective (*See instructions. Select, complete and* (X) *mark one of the following*):

() At the time and date set by sec. 180.0123(1), Wis. Stats.

OR

(X) as of July 1, 1999
(date)

ACCT# 0000011149 CLASS CODE 340
TRX# 0001074003 \$25.00

F. Executed on June 30, 1999 (date) by the surviving corporation on behalf of all parties to the merger.

Title: () President (X) Secretary
or other officer title _____

Karen E. Spors
(Signature)

Karen E. Spors
(Printed Name)

This document was drafted by James C. Green, Esq.
(Name of the individual who drafted the document)

DEL CORP/61(R12/98) Use of this form is voluntary.

99 JUL -1 PM 3:22 J3
RECEIVED - DEPT OF
FINANCIAL INSTITUTIONS
STATE OF WISCONSIN

Exhibit A

PLAN OF MERGER

I. Name and state of incorporation of the merging (**non-surviving**) corporation(s):

Name: Omni Corporation	State of Incorporation: Illinois
Name:	State of Incorporation:

II. Name (prior to any amendment in the Plan of Merger to change the name) and state of incorporation of the **surviving** corporation:

Name: Sta-Rite Industries, Inc.	State of Incorporation: Wisconsin
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III. State the terms and conditions of the merger.

The Surviving Corporation is the sole shareholder in the non-surviving Corporation. All assets, liabilities, title licenses and interests of Omni Corporation will be transferred to Sta-Rite, Industries, Inc., and it shall remain a Wisconsin Corporation.

IV. State the manner and basis of converting the shares of each non-surviving corporation:

- (A) into shares, obligations or other securities of the surviving (or any other) corporation; or
- (B) into cash or other property, in whole or part.

The shares of the non-surviving Corporation will be redeemed and cancelled by the Surviving Corporation, which is the sole Shareholder of the non-surviving Corporation.

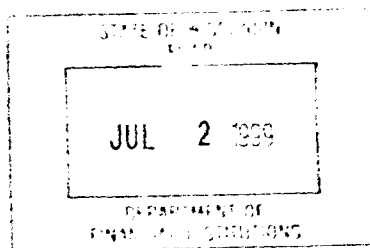
V. State any amendments to the surviving **domestic** corporation's articles of incorporation (see item 2 of the instructions):

VI. State any other provisions:

Ar Kide, & Mergin
Mergin: Unlicensed Foreign Corporation
Intro: Sta-Rite Industries, Inc. (Domestic) (Survivor)

Use Draw Dec. #11149
for \$25.00 Exp. Fee only

Note
Mergin
Effectuated
9/11/99



\$50.00 plus \$25.00 Exp. Fee

9/6 Tammey / Dawson, CT
CT CORPORATION SYSTEM
44 E MIFFLIN ST
MADISON WI 53703